

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF PUERTO RICO**

IN RE: AIDA L ORTIZ ORTIZ

CASE NUMBER: 10-08174(SEK)

JUDGE ESL

DEBTOR.

CHAPTER 11

**DEBTOR'S MONTHLY OPERATING REPORT (INDIVIDUAL)
FOR THE PERIOD**

FROM 12/1/2010 TO 12/31/2010

Comes now the above-named debtor and files its Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

Dated: 1/24/2011

/s/ Carmen D. Conde Torres
Attorney for Debtor
USDC -PR 207312

Debtor's Address
and Phone Number:
P O BOX 3960
GUAYNABO, PR
00970

Tel. 787-788-8525

Attorney's Address
and Phone Number:
C. Conde & Assoc.
254 San Jose St. Suite # 5
San Juan, PR 00901-1523
USDC-PR 207312
Tel. 787-729-2900
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Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

For assistance in preparing the Monthly Operating Report, refer to the following resources on the United States Trustee Program website,
http://www.usdoj.gov/us/r21/reg_info.htm

- 1) Instructions for Preparation Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs)

SUMMARY OF CASH RECEIPTS AND CASH DISBURSEMENTS

Case Name:	AIDA L ORTIZ ORTIZ
Case Number:	10-08174

Note: The information requested below is a summary of the information reported the various Schedules and Attachments contained within this report.

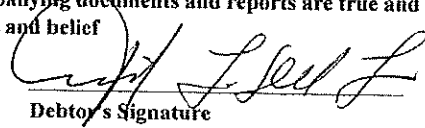
	Month	Cumulative Total
CASH- Beginning of Month (Household)	5828.54	23,115.28
CASH- Beginning of Month (Business)		
Total Household Receipts	5283.30	19830.05
Total Business Receipts		
Total Receipts	11111.84	11111.84
Total Household Disbursements	4878.95	19779.32
Total Business Disbursements		
Total Disbursements	4878.95	19779.32
NET CASH FLOW (Total Receipts minus Total Disbursements)	6232.89	18224.58
CASH- End of Month (Individual)	6232.89	6232.89
CASH- End of Month (Business)		

CALCULATION OF DISBURSEMENTS FOR UNITED STATES TRUSTEE QUARTERLY FEES

TOTAL DISBURSEMENTS (From Above)	4878.95	4878.95
Less: Any Amounts Transferred or Paid from the Business Account to the Household Account (i.e., Salary Paid to Debtor or Owner's Draw)	0	325
DISBURSEMENTS FOR U.S. TRUSTEE FEE CALCULATION	325.00	650.00

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief

This 21 day of JANUARY 2011


Debtor's Signature

**SCHEDULE OF HOUSEHOLD
CASH RECEIPTS AND CASH DISBURSEMENTS**

	Month	Cumulative
	DECEMBER	Total
CASH - Beginning of Month	5828.54	28,943.82
CASH RECEIPTS		
Salary or Cash from Business	5283.3	
Wages from Other Sources (attach list to this report)		
Interest or Dividend Income		
Alimony or Child Support		
Social Security/Pension/Retirement		
Sale of Household Assets (attach list to this report)		
Loans/Borrowing from Outside Sources (attach list to this report)		
Other (specify) (attach list to this report)		
TOTAL RECEIPTS	11,111.84	
CASH DISBURSEMENTS		
Alimony or Child Support Payments		
Charitable Contributions		
Gifts	1075.62	1075.62
Household Expenses/Food/Clothing	671.51	1647.06
Household Repairs & Maintenance	195.00	195
Insurance		
IRA Contribution		
Lease/Rent Payments		
Medical/Dental Payments	132.74	938.04
Mortgage Payment(s)	1667.82	6671.64
Other Secured Payments		
Taxes - Personal Property		
Taxes - Real Estate		
Taxes Other (attach schedule)		
Travel & Entertainment		468
Tuition/Education		
Utilities (Electric, Gas, Water, Cable, Sanitation)	387.65	1324.99
Vehicle Expenses	78.15	322.7
Vehicle Secured Payment(s)		
U. S. Trustee Quarterly Fees	325	650
Professional Fees (Legal, Accounting)	0	1039
Other (attach schedule)	302.7	2548.7
		285
		54
	42.76	90.27
Total Household Disbursements		
CASH - End of Month (Must equal reconciled bank statement- Attachment No. 2)	6232.89	17310.02

QUESTIONNAIRE		
	YES*	NO
1. Have any assets been sold or transferred outside the normal course of business during this reporting period?		XXX
2. Have any funds been disbursed from any account other than a debtor in possession account?		XXX
3. Are any post-petition receivables (accounts, notes, or loans) due from any relatives, insiders, or related party?		XXX
4. Have any payments been made on pre-petition liabilities this reporting period?		XXX
5. Have any post-petition loans been received by the debtor from any party?		XXX
6. Are any post-petition payroll taxes past due?		XXX
7. Are any post-petition state or federal income taxes past due?		XXX
8. Are any post-petition state or local sales taxes past due?		XXX
9. Are any post-petition real estate taxes past due?		XXX
10. Are any amounts owed to post-petition creditors/vendors delinquent?		XXX
11. Are any wage payments past due?		XXX

*If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

INSURANCE INFORMATION		
	YES	NO*
1. Are real and personal property, vehicle/auto, general liability, fire, theft, worker's compensation, and other necessary insurance coverages in effect?	XXX	
2. Are all premium payments current?	XXX	

*If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE			
TYPE of POLICY and CARRIER	Period of Coverage	Payment Amount and Frequency	Delinquency Amount
CA46048224-0001-000 & Triple S Insurance	08/25/2010-08/25/2011	229	0

___ Check here if United States Trustee has been listed a a Certificate Holder on all policies of insurance.

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:
Estimated Date of Filing the Plan of Reorganization and Disclosure Statement: _____

BANK ACCOUNT RECONCILIATIONS

Bank Account Information		Account #1	Account #2	Account #3	Account #4
Name of Bank:	BPPR				
Account Number:	027-386732				
Purpose of Account (Business/Personal)	Personal				
Type of Account (e.g. checking)	Checking				
1. Balance per Bank Statement	5828.54				
2. ADD: Deposits not credited (attach list to this report)	5283.3				
3. SUBTRACT: Outstanding Checks (attach list)	4875.95				
4. Other Reconciling Items (attach list to this report)	3.00				
5. Month End Balance (Must Agree with Books)	6232.89				
TOTAL OF ALL ACCOUNTS		6232.89			\$

Note: Attach a copy of the bank statement and bank reconciliation for each account.

Investment Account Information	Date of Purchase	Type of Instrument	Purchase Price	Current Value
Bank / Account Name / Number				
N/A				

Note: Attach a copy of each investment account statement.

CASH DISBURSEMENTS DETAILS - HOUSEHOLD

Name of Bank	BPPR
Account Number	027-386732
Purpose of Account (Personal)	PERSONAL
Type of Account (e.g., Checking)	CHECKING

[illegible]

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.
